

RCRIS UNIVERSE MAINTENANCE FORM

BSS
10/13

EPA ID M D D 0 2 2 Y 9 5 1 9 6

Facility Name OWENS ILLINOIS Plastics

Source: N A (S) E

Notification Date 9/20/93

Waste Activity	Type	RCRA Reg Status	RCRA Reg Description
Generator	<u>2</u>	<u>R</u>	
Transporter			
TSD			
Burner			
HWF Market to Blender		HWF Other Market	HWF Buner
OSO Market to Burner		OSO Other Market	OSO Burner
SO ACT:			
Burner Type: Utility Boiler		Industrial Boiler	Furnace
Underground Injection Control:			
Recycler:			
Mode of Transportation: Air Rail Highway Water			
Other			

Process Code Information							
Source <u>E</u> or <u>S</u> (circle correct one)							
PROCESS CDE/SEQ	COMM AVAIL	AMT TYPE	STATUS	AMOUNT	UOM	NO. OF UNITS	REPORT DATE

<input checked="" type="checkbox"/> IR Inspection report	<input type="checkbox"/> Affidavit from the facility
<input type="checkbox"/> Revised Notification from the state	<input type="checkbox"/> Affidavit from the state
<input type="checkbox"/> Revised Notification from the facility	<input type="checkbox"/> Biennial report
<input type="checkbox"/> EPA clean closure certificate	<input type="checkbox"/> Documentation not required
<input type="checkbox"/> State documentation certifying clean closure	
<input type="checkbox"/> Other	
Date to Data Entry <u>OCT 11 1993</u>	
Batch Number <u>102</u>	
Date QAd <u>OCT 18 1993</u>	



State of Maryland
Department of the Environment
Hazardous and Solid Waste Management Administration
2500 Broening Highway, Baltimore, Maryland 21224

Sequence # _____

Report of Observations

FI-930920 BC118

Type of Inspection/Observations: Routine Inspection Date 9/20/93

Facility Name: Owens-Illinois Plastic Products

Remarks: 201 Kane St., Balto. 21224

met w/ Ken Good, plant engineer
Facility manufactures high density polyethylene bottles for soap and chemicals. Plastic resin beads are received and molded here. Large customers include Procter and Gamble and Lever Bros.

The process itself does not generate hazardous waste. Three Safety Kleen parts washers generate spent mineral spirits which is removed by SK using the manifest ^{system}. Several one-time shipments have occurred. In 1988, a waste oil tank was contaminated w/ SK solvent, and had to be disposed as hazardous waste. Also in 1988, PCB disposal from transformers accounted for about 7,000 lbs. of hazardous waste.

Facility is a small quantity generator of hazardous waste.

Observer: Douglas E. Frantz

Person Interviewed: Kenneth E. Good 9/20/93

I.D. - FOR OFFICIAL USE ONLY

W	4	0	0	0	2	2	4	9	5	1	9	6	T/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)**A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.) * See note below.☐ 1. IGNITABLE
(D001)☐ 2. CORROSIVE
(D002)☐ 3. REACTIVE
(D003)☐ 4. TOXIC
(D000)**X. CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

NAME & OFFICIAL TITLE (type or print)

DATE SIGNED


Joseph N. L. Boone

PLANT MANAGER

8-20-80

EPA Form 8700-12 (6-80) REVERSE

*This facility does not now generate hazardous waste material. This notification of hazardous waste activity is being made so that we can ship ignitable or other hazardous materials should the need arise in the future. (Example: waste oil, if added to the list of controlled substances.)

 U.S. ENVIRONMENTAL PROTECTION AGENCY NOTIFICATION OF HAZARDOUS WASTE ACTIVITY		INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).						
INSTALLATION'S EPA I.D. NO.	PLEASE PLACE LABEL IN THIS SPACE							
I. NAME OF INSTALLATION								
II. INSTALLATION MAILING ADDRESS								
III. LOCATION OF INSTALLATION								
FOR OFFICIAL USE ONLY								
COMMENTS								
RURA SECTION EPA REGION III AUG 20 80 000093								
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 35%;">INSTALLATION'S EPA I.D. NUMBER</td><td style="width: 15%;">APPROVED</td><td style="width: 50%;">DATE RECEIVED (yr., mo., & day)</td></tr><tr><td>02249519631</td><td>A</td><td>800820</td></tr></table>			INSTALLATION'S EPA I.D. NUMBER	APPROVED	DATE RECEIVED (yr., mo., & day)	02249519631	A	800820
INSTALLATION'S EPA I.D. NUMBER	APPROVED	DATE RECEIVED (yr., mo., & day)						
02249519631	A	800820						
I. NAME OF INSTALLATION								
OWENS- ILLINOIS PLASTIC PRODUCTS DIV								
II. INSTALLATION MAILING ADDRESS								
STREET OR P.O. BOX								
201 KANE STREET								
CITY OR TOWN								
BALTIMORE								
ST. ZIP CODE								
MD 21224								
III. LOCATION OF INSTALLATION								
STREET OR ROUTE NUMBER								
201 KANE STREET								
CITY OR TOWN								
BALTIMORE								
ST. ZIP CODE								
MD 21224								
IV. INSTALLATION CONTACT								
NAME AND TITLE (last, first, & job title)								
LAMORE JOSEPH PLANT MANAGER								
PHONE NO. (area code & no.)								
301-633-8282								
V. OWNERSHIP								
A. NAME OF INSTALLATION'S LEGAL OWNER								
OWENS- ILLINOIS INC TOLEDO OHIO								
B. TYPE OF OWNERSHIP (enter the appropriate letter into box)								
F = FEDERAL M = NON-FEDERAL								
M								
VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))								
<input checked="" type="checkbox"/> A. GENERATION <input type="checkbox"/> B. TRANSPORTATION (complete item VII)								
<input type="checkbox"/> C. TREAT/STORE/DISPOSE <input type="checkbox"/> D. UNDERGROUND INJECTION								
VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))								
<input type="checkbox"/> A. AIR <input type="checkbox"/> B. RAIL <input type="checkbox"/> C. HIGHWAY <input type="checkbox"/> D. WATER <input type="checkbox"/> E. OTHER (specify):								
VIII. FIRST OR SUBSEQUENT NOTIFICATION								
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.								
<input type="checkbox"/> A. FIRST NOTIFICATION <input type="checkbox"/> B. SUBSEQUENT NOTIFICATION (complete item C)								
C. INSTALLATION'S EPA I.D. NO.								
IX. DESCRIPTION OF HAZARDOUS WASTES								
Please go to the reverse of this form and provide the requested information.								

RCRIS MAINTENANCE FORM FOR STATE AND EPA UNIVERSE INFORMATION

EPA ID

M D D O 2 2 4 9 5 1 9 6

Facility Name

OWENS-ILLINOIS PLASTIC

Waste Activity	Source	Type	RCRA Reg Status	RCRA Reg Description	Notification Date
Generator	S	1	N	7	3/15/93
TSD	S				
Transporter	S				
Burner	S				

Process Code Information

Source **E** or **S** (circle correct one)

PROCESS CDE/SEQ	COMM AVAIL	AMT TYPE	STATUS	AMOUNT	UOM	NO. OF UNITS	REPORT DATE

<input type="checkbox"/> IR Inspection report	<input type="checkbox"/> Affidavit from the facility
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<input type="checkbox"/> State documentation certifying clean closure	
<input type="checkbox"/> Other	

APR 09 1993

Date to Data Entry _____

Batch Number 67 APR 23 1993

Date QAd _____



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

• MDD 02 249 5196

Owens-Illinois Plastic Products Div.
201 Kane Street
Baltimore, MD 21224

INSTALLATION ADDRESS

201 Kane Street
Baltimore, MD 21224